

ACUSHNET COMPANY**FAX COVER SHEET**

DATE: May 18, 2006

TO: Mail Stop Amendment
Commissioner for Patents
Examiner: Buttner, David J.
Art Unit: 1712
Facsimile No.: 571-273-8300

FROM: William B. Lacy
Customer Number: 40990
Phone No.: 508-979-3540

RE: Application Serial No.: 10/627,504
Response to Office Action of January 18, 2006
Pages including cover sheet: 13

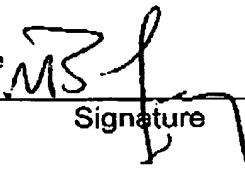
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MAY 18 2006

Certificate of Transmission Under 37 C.F.R § 1.8

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on May 18, 2006
Date



Signature

William B. Lacy
Name of person signing Certificate

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MAY 18 2006

*Effective on 12/08/2004.**Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).***FEE TRANSMITTAL
For FY 2005****TOTAL AMOUNT OF PAYMENT**

(\$ 250.00)

Complete If Known

Application Number	10/627,504
Filing Date	July 25, 2003
First Named Inventor	David A. Bulpett
Examiner Name	David J. Buttner
Art Unit	1712

Attorney Docket No. B03-50

METHOD OF PAYMENT

- Deposit Account Deposit Account Number: 502309 Deposit Account Name: Acushnet Company
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- | | |
|---|---|
| <input checked="" type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s)
under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments |

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>Filing Fee (\$)</u>	<u>Search Fee (\$)</u>	<u>Examination Fee (\$)</u>	<u>Fees Paid (\$)</u>
<input type="checkbox"/> Utility	300	500	200	
<input type="checkbox"/> Design	200	100	130	
<input type="checkbox"/> Reissue	300	500	600	
<input type="checkbox"/> Provisional	200	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Fee (\$)

50

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200

<u>Total Claims</u>	<u>Paid TC</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
		0	50	0

Paid TC = the greater of 20 or highest number of total claims paid for

<u>Independent Claims</u>	<u>Paid IC</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
		0	200	0

Paid IC = the greater of 3 or highest number of independent claims paid for

3. APPLICATION SIZE FEE
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	(round up to integer)	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50		250	

4. OTHER FEES

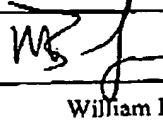
Statutory Disclaimer \$130

130

Extension for response within first month \$120

120

SUBMITTED BY

Signature		Registration No.: 48,619	Telephone: 508-979-3540
Name	William D. Lacy	Date: May 18, 2006	

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No.: 10/627,504

Art Unit: 1712

Applicant: David A. Bulpett

Examiner: David J. Buttner

Filed: July 25, 2003

Confirmation No.: 3239

For: URETHANE ELASTOMERS WITH
IMPROVED COLOR STABILITY

Attorney Docket No.: B03-50

RESPONSE TO OFFICE ACTION

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed January 18, 2006, Applicants respectfully submit the following amendments and remarks for entry into the above-identified application.

Listing of Claims begins on page 2 of this response.

Remarks begin on page 6 of this response.

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